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**PLEASE DELIVER THIS FACSIMILE  
TO EXAMINER KAMAL B. DIVECHA**

TO: Commissioner for Patents  
Attn: Examiner Kamal B. Divecha  
Group Art Unit 2151  
Patent Examining Corps  
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Alexandria, VA 22313

FROM: David W. Victor

OUR REF: 0037.0116  
TELEPHONE: 310-556-7983

Total pages, including cover letter: 22

**PTO FAX NUMBER 1-571-273-8300**

If you do NOT receive all of the pages, please telephone us at 310/556-7983, or fax us at 310/556-7984.

Description of Documents Transmitted: REQUEST FOR CONTINUED  
EXAMINATION (RCE) TRANSMITTAL; PTO/SB/17 FEE TRANSMITTAL; COPY  
OF PREVIOUSLY FILED AMENDMENT

Applicant: F. Ahmad et al.  
Serial No.: 09/972,362  
Filed: October 5, 2001  
Group Art Unit: 2151  
Docket No.: SJO920010099US1

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on  
November 23, 2005

By:   
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PTO/SB/17  
0037.0116

|   |                        |                  |
|---|------------------------|------------------|
| <b>FEE TRANSMITTAL</b>                    | Application Number     | 09/972,362       |
| <b>for FY 2005</b>                        | Filing Date            | October 5, 2001  |
|   | Inventor               | F. Ahmad et al.  |
|   | Group Art Unit         | 2151             |
|   | Examiner Name          | Kamal B. Divecha |
| Total Amount of Payment: <b>\$ 790.00</b> | Attorney Docket Number | SJO920010099US1  |

**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge the indicated fees and/or credit any overpayments to Deposit Account Number: 09-0466  
☐ Charge any additional fee required under 37 CFR 1.16 and 1.17  
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2. ☐ Payment enclosed:  
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1. ☐ BASIC FILING FEE  
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Large Entity Fee Code 1011 \$300.00
2. ☐ UTILITY SEARCH FEE \$500.00
3. ☐ UTILITY EXAMINATION FEE \$200.00
4. ☐ EXTRA CLAIMS FEES  
Total Claims \_\_\_\_ - 20\* x \$50= \$ \_\_\_\_  
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- Subtotal \$ \_\_\_\_

\*(or number previously paid for)

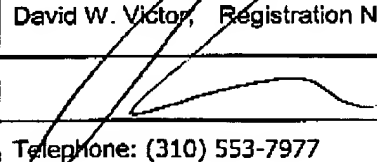
**FEE CALCULATION (continued)**

3. ADDITIONAL FEES (large entity)
- |  |        |
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| <input type="checkbox"/> Surcharge- late provisional filing fee or cover sheet | \$50   |
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| <input type="checkbox"/> Requesting publication of SIR after action            | \$1840 |
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| <input checked="" type="checkbox"/> Request for Continued Examination (RCE)    | \$790  |
| <input type="checkbox"/> Other:  |        |

SUBTOTAL

\$ 790

**Submitted by:**

|                          |   |                       |
|--------------------------|---|-----------------------|
| Firm or Individual Name: | David W. Victor, Registration No. 39,867  | Customer No.<br>46917 |
| Signature:               |  |                       |
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